#### File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

### FOR INSTRUCTIONS, SEE BACK OF FORM **DISCLOSURE SUMMARY PAGE**

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed

electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

Parties must be filed electr			
	Reset Form	4. W. M.	907 19 111 9
COMMITTEE NAME (Must be same as on Statement of	Organization)	-	F.17 5
Topa Woodin Shection	) Campaign	FORM	
IMPORTANT: Indicate by # type of committee you are reporting	the 1 T	DR-2	DISCLOSURE
(1)Statewide/Legislative/Judge Standing for Retention Candida (4)County Central Committee (5)County Candidate (6)City (	"andidata (7)Cahari Danada - Outan area	(Rev. 12/2009)	REPORT
Subdivision Candidate (8) County PAC (9) City PAC (10) Sci 11) Local Ballot issue	hool Board or Other Political Subdivision PAC (	For Office Use On	_
CANDIDATE COMMITTEES ONLY:		Comm. #	
Candidate Name	Political Party (if applicable)	Scanned	<del></del>
Ton WOODIN	Den	Computer	·
Office Sought  UNION COUNTY SUSPICION	District (if Senate or House)	Audited	
Late reports are subject to possible dvil and criminal penalties	Pursuant to lowa Code sections 68B 32A(7) and	688 401/3) the con	didata for a
candidate's committee, and the chairperson, for any other type	of committee, is the individual responsible for fili	ng timely and accura	te reports.
000 5	tere or the h		
SIGNATURE OF PERSON FILING REPORT	641-782-4378	10-17-1	0
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE SE	GNED
1 AM FILING A OCT 19, 2010			
(report date)	REPORT FOR (1) ELECTION /(2)NO	ON-ELECTION YEA	AR.
	Indicate by #		
CHECK IF AMENDMENT TO REPORT DATED	Local C	committees, enter Date	e of Election
Check if this is final (termination) report and attach Notic	ce of Dissolution Form DP 3		
(You must continue to file reports until a DR-3 is f	iled \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	& Local Committees, Dection is held	enter County in
STATEMENT OF CASH ON HA	MD		
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For Instructions, See Back of Form			
	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A	MONETARY
COMMENTED TO SERVICE S PERSONAL TURIOS)		(Rev. 07/03)	RECEIPTS

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
TOM WOOON Election Campaign		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: 15 A CONTROL	<u> </u>	·

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FO FUND RAISEI
06-15-10	ID# CK#	Russ Ritman 1102 Hillianst		\$200-	INCOM
(Xe-15-10	ID# CK#	ALVW SCLLARA 1204 N BIRCH			
06-15-10	ID#	MEL MCKIE 1100 HILLOUST ON		25-	
<u> </u>	ID#	CAESTON IA Ton intodin		50 -	
16-15-10	CK#	1201 WARMS St CASSTW IA Brotte Byton		100	
	CK#	3310 170451 CNSTUN 1A		150-	
8-4-10	CK#	Rolano Roth 2348 Hi + Ozi RD CRESTON		30,-	
6-21-1D	ID# CK#	Rocent carceson 4922 Hembak			
3-79-10	ID# CK#	J.R. Occing BAG		50,-	
7-29-10	ID# CK#	OARLAN Atmon		100-	
729-10	ID# - CK#	White Saves		32.	
	UN#	CAFSTON IA	SUB-TOTAL	50-	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by familial relationship, enter "not applicable" in the relationship column.

Page of for Schedule A)

Reset Form

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF
AME	NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Tom Woodn Election Campaign

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/1/10	1001	Hyles chester law	Cluy for throws	<b>\$</b> 48.15
9/13/10		Tom Woodn CN 1571N	Represent for Dypo AD	6120
0/8/01	ID# СК#   003	Sions by CAC Chiston Ima	LAWN Signs	410.00
10/13/10	CK# 1004	CRESTON Name AUDINTION	ADV PAPEL	368.00
	CK#	LOW State SAVINGS BANK CNSTON IA	BANK fass	Jung - 321 Jung 3.21 Myd 3.21
	CK#			
	ID# CK#			
j	ID# CK#			
			SUB-TOTAL	\$ 896.98

TOTAL (if last page of this schedule)

896.98

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page 1 of 1	
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or Instructions, See Back of Form		
ONTRIBUTIONS MONEY TAXES	Rese ( Com	SCHEDULE

## **CONTRIBUTIONS -- MONEY TAKEN IN**

	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)  Tom Wodow ELSchun Campal(20		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE. IS A CONTROL		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FC FUND RAISE
7-29-10	ID#	WENZIG Construction			INCOM
	CK#	Christian 1A	15	\$150-	<u> </u>
Q h 10	ID#	MGL AMAN	`		
8-10-10	CK#	chesta !A		200-	
	ID#	MEL DAVIS			
8-10-10	CK#	ansatu IA		75-	
0 1 15	ID#	Davis arise			
9-1-10	CK#	Chistin 1A		50 -	
0 0	ID#	Domis Carter			
9-2-10	CK#	Chistin lows		50 -	
9-2-10	ID#	Armso Kayon III			
1-4-10	CK#	chystan Ima		句-	
î H	ID#	Day Dridell			
9-15-10	CK#	cheston lown		100 -	
	ID#				
	CK#				
i	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	(J5W	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) . If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.